GAS SAFETY CERTIFICATE

This form can be used as a Landlord's gas safety certificate

Page 1 of 2 Ser No. 049918

Engineer [redacted]

Gas Safe [redacted]

Engie Office Address 14A Eyncourt Ave Sheffield S10 3EA.

Contract Number

Customer Name Lancastones C-D

Site Address 2 Woodhead Way. Sheffield

Postcode S10 3AS

Received By NO ONE Signature

Landlords Details If Different

Name

Address

Postcode

Rented Accommodation YES/NO

Enter Company Registration Number

App	Landlords appliance Yes/No	Service Inspection Repair	Appliance Details					
			Location	Type	Model	Serial Number	Burner Manufacturer	Flue Type (OF/RS/FL)
1	YES	SERVICE	Airing Room	Hot Water Boiler 1	Combi Quinn.		NOT WORKING	RS
2	YES	SERVICE		H/W Boiler 2.	Combi Quinn No 30	16165139/2970	Baxi.	RS
3								
4								

General Safety Checks	Result	General Safety Checks	Result
Gas booster/compressor operating correctly (Yes /No/NA)	YES	Flue termination satisfactory (Yes/No/NA)	YES
Is there a current gas installation line diagram at primary meter (Yes/No/NA)	YES	Has a tightness test been carried out from local isolation valve (Yes/No/NA)	YES
Is the meter installation correct (Yes/No)	YES	Is gas pipework electrically bonded (Yes/No)	YES
Gas installation pipework adequately supported (Yes/No)	YES	Are adequate emergency isolation valves fitted (Yes/No)	YES
Gas installation pipework sleeved and sealed as appropriate (Yes/No)	YES	Are emergency valve handles in place and labelled (Yes/No)	YES
Is gas pipework colour coded or identified (Yes/No/NA)	YES	Do valves fall to the correct position (Yes/No)	YES
Is flue system installed in accordance with standards (Yes/No)	YES	Area clear of combustible materials (Yes/No)	YES

Ventilation			
Low level free area cm²	Actual 2192	Required (Calculated)	RS
High level free area cm²	Actual 2192	Required (Calculated)	RS
All ventilation grills clear and unobstructed (Yes/No)	YES	Fans and/or flue interlocks operating correctly (Yes/No/NA)	NA.

Details of any faults	Remedial Action Taken	Comments and calculations
Fle Switch Not Working	New one fitted	
Boiler 1 Not Working	Faced Back Cowl	
	New one Needed	

Appliance Checks	App 1 High	App 1 Low	App 2 High	App 2 Low		App 1 High	App 1 Low	App 2 High	App 2 Low		App 1 High	App 1 Low	App 2 High	App 2 Low
Flue flow test satisfactory (Yes/No/NA)			NA	NA	Gas burner pressure (mbar) or heat input kW/h required			21	21	Carbon Dioxide (CO_2) (%)			8·8	9·3
Spillage test satisfactory (Yes/No/NA)			YES	YES	Gas burner pressure (mbar) or heat input kW/h measured			20·5	23	Excess Air (%)			374	242·5
Air/Gas switch operating correctly (Yes/No/NA)			NA	NA	Gas rating measured (kW/h / NA)			30·4	7·75	CO/CO_2 Ratio			0·0003	0·0004
Flame proving devices operating correctly (Yes/No/NA)			YES	YES	Air/gas ratio control setting (%/NA)			NA	NA	Gross Efficiency (%)			98·7	108·1
Burner lock out time (seconds)			73	73	Net flue gas temperature (gross less ambient) (°C)			28·7	20·0	CO flue dilution (ppm)			NA	NA
Temperature and limit thermostats operating correctly (Yes/No)			YES	YES	Oxygen (O_2 %)			5·7	6·3	Standing pressure (mbar)			23	23
Heat net input rating data (kW)			30	30	Carbon Monoxide (CO)(ppm)			24	38	Working pressure (mbar)			20·5	22·5
										Is appliance safe for use (Yes/No)			NO	NO
										Has a warning advice notice been raised (No or Warning notice Ser No or No's)			NO	
										Test Instrument			KANE	
										Test Instrument serial number			121722001	

Worksheet No (if used)	
Checked by (office use)	
Entered on database	

Declaration of gas safety - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation and use) regulations, standards and procedures.

Date	15-07-22
Signature	[redacted]

Yellow - Service Centre, Pink - Site, Green - Engineer